FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

118/68	9
OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated averag hours per respo	
SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED
DATER	CEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: Amendment	Section 4(6) Secti
A. BASIC IDENTIFICATION DATA	1 0 0000
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Diligent Software Systems Corp.	AUG I G EUU
Address of Executive Offices (Number and Street, City, State, Zip Code) 3508 Bassett Street, Santa Clara CA 95054	Telephone Number (Including Area Code) (408) 562-9925
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Internet Software (Browsers/Plug-ins)	PRACESSE
Type of Business Organization	HOULOUE
✓ corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed ☐ other	(please specify): AUG 2 3 2002
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated FINANCIAL ate:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97)

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		A	. BASIC IDI	SNII	FICATION DATA		-	-	
Each beneficial ownEach executive offic	e issuer, if the issuer her having the power to	as beer vote o oorate i	ssuers and of corporat	vote					securities of the issuer; nd
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)	-							
Avraham Goraly	:								
Business or Residence Address	ss (Number and Stree	et, City	, State, Zip Code)						
10330 N. Foothill Blvd., #A-	19, Cupertino, CA	95014							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	indívidual)								
Eytan Ben-Meir									
Business or Residence Address	•	et, City	, State, Zip Code)						
1143 Hopkins Avenue, Palo	Alto, CA 94301			_			<u>-</u> .		
Check Box(es) that Apply:	Promoter	<u>⊠</u>	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	f individual)								•
Redwood Ventures Partner	s, LLC								
Business or Residence Addre	•		, State, Zip Code)						
4984 El Camino Real, Ste. #	200, Los Altos ,CA								
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)								
Redwood Ventures III, L.P.	·								
Business or Residence Addre	,		, State, Zip Code)						
4984 El Camino Real, Ste. #	200, Los Altos, CA	94022							
Check Box(es) that Apply:	Promoter	<u>⊠</u>	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)								
Eli Sternheim									
Business or Residence Addre 3489 South Court Street, Pa	•	et, City	y, State, Zip Code)						
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in	f individual)								
Redwood Management III,	L.P.								
Business or Residence Addre	ss (Number and Stre	et, City	, State, Zip Code)						
4984 El Camino Real, Ste. #	200, Los Altos ,CA	94022							
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Pharos Capital Partners, L.	P								
Business or Residence Addre	ss (Number and Stre	et, City	, State, Zip Code)						
The Crescent, 1000 Crescen					<u> </u>				
	(Use blan	k sheet	, or copy and use add	lition	al copies of this sheet	, as n	ecessary)		

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Dogwood Investments, Inc.	findividual)				
Business or Residence Addres	ss (Number and Stree	t City State Zin Code)			
c/o Eastman Chemical Com	•		gsport, TN 37660-6075		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Rajvir Singh	f individual)	,			
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
1055 Fremont Avenue, Los	Altos, CA 94022				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Battery Ventures V, L.P.					
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
901 Mariner's Island Blvd.,	Ste. 475, San Mateo	, CA 94404			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Concord Ventures II (Caym	nan) <u>,</u> L.P.				
Business or Residence Addre	ss (Number and Stree	t, City, State, Zip Code)			
85 Medinat Hayhudim Stre	et, 7 th Floor, Herzlia	Pituah, 46140, ISRAEL			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Liberty Mutual Insurance (Company				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Investments 9A, 175 Berkel	ey Street, Boston, M	A 02117			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)			•	
Charles W. Jepson					
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
c/o Diligent Software System	ns Corporation, 350	8 Bassett Street, Santa Cl	ara, CA 95054		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it Philip D. Ranger	f individual)				-
Business or Residence Addre	use (Number and Street	at City State 7in Code)			
c/o Diligent Software System	•	- · · · · · · · · · · · · · · · · · · ·	ara CA 05054		
					□ C 1 1′
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Thomas C. DeFilipps					
Business or Residence Addre	•				
Wilson Sonsini Goodrich &	Rosati, 650 Page M	ill Road, Palo Alto, CA 94	1304		

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, if Ravi Mohan	individual)				
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
Battery Ventures, 901 Marin	ner's Island Bouleva	rd, Ste. #475, San Mateo	, CA 94404		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Yair Safrai	findividual)				
Business or Residence Addres	•		Pituah, 46140, ISRAEL		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Address	ss (Number and Stree	t, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ess (Number and Street	et, City, State, Zip Code)			
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	and the state of t	u union o	_	В.	INFOR	MATION A	ABOUT OF	FERING	49			
1. H	as the issuer s	old, or does the	issuer intend	-			-				Yes	No ⊠
2. W	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?							\$	N/A			
3. D	as the offerir	a narmit ioint	overehin of a	cinale unit?							Yes	No ⊠
	Does the offering permit joint ownership of a single unit?											
re pe th	muneration for erson or agent an five (5) per	r solicitation of of a broker or d sons to be liste	purchasers in ealer registere	connection w d with the SE	vith sales of se EC and/or with	ecurities in th h a state or st	ne offering. I ates, list the	f a person to I name of the b	oe listed is ar roker or deal	associated ler. If more		
	aler only. me (Last nam	e first, if indivi	dual)						· '			
Busines	ss or Residence	e Address (Nu	nber and Stree	t, City, State	e, Zip Code)					.		
Name o	of Associated	Broker or Deal	er									
States in	n Which Perso	on Listed Has S	olicited or Inte	ends to Solic	it Purchasers		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
(Che	ck "All States	" or check indi	viduals States)						••••••		☐ Al	1 States
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Dusines	ss or Resident	e Address (Nu	moer and succ	i, City, State	e, Zip Code)							
Name o	of Associated	Broker or Deal	er									
States i	n Which Pers	on Listed Has S	Solicited or Inte	ends to Solic	it Purchasers							
(Che	eck "All States	" or check indi	viduals States)	· ·		•••••						11 States
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Full Na	ame (Last nam	e first, if indiv	dual)									
Busine	ss or Residence	e Address (Nu	mber and Stree	et, City, State	e, Zip Code)						 .	
Name o	of Associated	Broker or Deal	er									
States i	n Which Pers	on Listed Has S	Solicited or Inte	ends to Solic	it Purchasers							
(Che	eck "All States	s" or check ind	viduals States))	•••••					••••••	□ A	Il States
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[II] [M]] [NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS		·
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		nt Already Sold
	Debt	=	\$	0.00
	Equity	\$ 2,500,000.08	\$ <u>2</u> ,	500,000.08
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$0.00_	\$	0.00
	Partnership Interests	\$	\$	
	Other (Specify)		\$	
	Total	\$ 2,500,000.08	\$ <u>2</u> ,	500,000.08
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors	Dolla	gregate r Amount Purchase
	Accredited investors	4	\$ <u>2.5</u>	80.000,000
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of Offering	Type of Security		r Amount Sold
	Rule 505	0	\$	0.00
	Regulation A	0	\$	0.00
	Rule 504	0	\$	0.00
	Total	0	\$	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs		\$	
	Legal Fees	\boxtimes	\$1	150,000.00
	Accounting Fees		\$	
	Engineering Fees		\$	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify)		\$	
	Total	\boxtimes	\$1	50,000.00

total expenses furnish proceeds to the issuer of the issuer of the purposes shown. I left of the estimate. I forth in response to P salaries and fees Purchase of real estate Purchase, rental or le Construction or leasing Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	the between the aggregate offering price given in response to Part C - Questive din response to Part C - Question 4.a. This difference is the "adjusted grown of the adjusted gross proceeds to the issuer used or proposed to be used if the amount for any purpose is not known, furnish an estimate and check the total of the payments listed must equal the adjusted gross proceeds to that C - Question 4.b above. The total of the payments listed must equal the adjusted gross proceeds to that the assign and installation of machinery and equipment. The total of the payments listed must equal the adjusted gross proceeds to the art C - Question 4.b above. The total of the payments listed must equal the adjusted gross proceeds to the art C - Question 4.b above.	ross d for each of the box to the the issuer set Pay Officers, Af	0.00	Paymo	50,000.08 ents To hers 0.00
the purposes shown. I left of the estimate. The forth in response to P salaries and fees Purchase of real estate Purchase, rental or lest Construction or leasing Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	If the amount for any purpose is not known, furnish an estimate and check the total of the payments listed must equal the adjusted gross proceeds to the art C - Question 4.b above. The above assing and installation of machinery and equipment assing and installation of machinery and equipment businesses (including the value of securities involved in this offering that the assets or securities of another issuer pursuant to a merger)	Pay Officers, Af	, Directors & ffiliates 0.00 0.00	Otl	0.00_
Purchase of real estate Purchase, rental or le Construction or leasing Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	asing and installation of machinery and equipment	Officers,	, Directors & ffiliates 0.00 0.00	Otl	hers 0.00
Purchase of real estate Purchase, rental or le Construction or leasing Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	asing and installation of machinery and equipment		0.00	□ \$	
Purchase, rental or le Construction or leasi Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	asing and installation of machinery and equipment ng of plant buildings and facilities businesses (including the value of securities involved in this offering that the assets or securities of another issuer pursuant to a merger)	s s			0.00
Construction or leasing Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	businesses (including the value of securities involved in this offering that the assets or securities of another issuer pursuant to a merger)	\$	0.00	Π«	
Acquisition of other used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	businesses (including the value of securities involved in this offering that the assets or securities of another issuer pursuant to a merger)			L \$	0.00
used in exchange for Repayment of indebt Working capital Other (specify): Column Totals	the assets or securities of another issuer pursuant to a merger)	1	0.00		0.00_
Working capital Other (specify): Column Totals	. 1		0.00	□ s	0.00
Other (specify): Column Totals	edness	s	0.00	S	0.00
Column Totals		🗆 \$	0.00	⊠ \$ <u>2,3</u>	350,000.08
		s	0.00	□ s	0.00
Total Payments		s	0.00	⊠ \$ <u>2,</u> 3	3 50,000,0 8
	Listed (column totals added)	······································	⊠ \$ _{-2,350}		•
ta ilia kana arawa a sana a	D. FEDERAL SIGNATURE				
The issuer has duly caused the issuer to undertaking by the issuer to	his notice to be signed by the undersigned duly authorized person. If this notice furnish the U.S. Securities and Exchange Commission, upon written request of to paragraph (b)(2) of Rule 502.	e is filed under Rule 50	05, the following		
Issuer (Print or Type) Diligent Software Systems Name of Signer (Print or		Date August 15, 2	:002		
Thomas C. DeFilipps	Secretary				